MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

serial no. 10/577425

FILING DATE

(FOR USE WITH FORM PTO-875)

APPLICANT(S)

CLAIMS

	ASI	AS FILED		AFTER 1 * AMENDMENT		AFTER 2 MAMENDMENT	
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TOTAL DEP.	510	4		<u> </u>		_	
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TOTAL CLAIMS	68	7.4					
	/REV 11/04	***************		Les Oracutations			

PTO - 1360 (REV. 11/04)

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